STIC Search Report
Biotech-Chem Library

STIC Database Tracking Number: 123967

TO: Cybille Delacroix **Location: REM-4C85/4C70** **Art Unit: 1614** **Wednesday, June 09, 2004** **Case Serial Number: 09/787866**	**From: Toby Port** **Location: Biotech-Chem Library** **Remsen 1A59** **Phone: 571-272-2523** **toby.port@uspto.gov**

Search Notes

Dear Examiner Delacroix,

Here are the results of your search.
Please feel free to contact me if you have any questions.

Toby Port

STIC SEARCH RESULTS FEEDBACK FORM

Biotech-Chem Library

Questions about the scope or the results of the search? Contact *the searcher or contact*:

Mary Hale, Information Branch Supervisor
571-272-2507 Remsen E01 D86

Voluntary Results Feedback Form

- *I am an examiner in Workgroup:* ☐ *Example: 1610*
- *Relevant prior art* ***found****, search results used as follows:*
  - ☐ 102 rejection
  - ☐ 103 rejection
  - ☐ Cited as being of interest.
  - ☐ Helped examiner better understand the invention.
  - ☐ Helped examiner better understand the state of the art in their technology.

  Types of relevant prior art found:
  - ☐ Foreign Patent(s)
  - ☐ Non-Patent Literature
    (journal articles, conference proceedings, new product announcements etc.)
- *Relevant prior art* ***not found:***
  - ☐ Results verified the lack of relevant prior art (helped determine patentability).
  - ☐ Results were not useful in determining patentability or understanding the invention.

Comments:

Drop off or send completed forms to STIC/Biotech-Chem Library Remsen Bldg.

```
=> file reg
FILE 'REGISTRY' ENTERED AT 09:38:10 ON 09 JUN 2004
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Property values tagged with IC are from the ZIC/VINITI data file
provided by InfoChem.

STRUCTURE FILE UPDATES:    7 JUN 2004  HIGHEST RN 690625-61-7
DICTIONARY FILE UPDATES:   7 JUN 2004  HIGHEST RN 690625-61-7

TSCA INFORMATION NOW CURRENT THROUGH JANUARY 6, 2004

  Please note that search-term pricing does apply when
  conducting SmartSELECT searches.

Crossover limits have been increased.  See HELP CROSSOVER for details.

Experimental and calculated property data are now available. For more
information enter HELP PROP at an arrow prompt in the file or refer
to the file summary sheet on the web at:
http://www.cas.org/ONLINE/DBSS/registryss.html

=> e 60-54-8
E1            1     60-49-1/RN
E2            1     60-51-5/RN
E3            1 --> 60-54-8/RN
E4            1     60-56-0/RN
E5            1     60-57-1/RN
E6            1     60-62-8/RN
E7            1     60-70-8/RN
E8            1     60-79-7/RN
E9            1     60-80-0/RN
E10           1     60-81-1/RN
E11           1     60-82-2/RN
E12           1     60-87-7/RN

=> s e3
L3            1 60-54-8/RN

=> d rn cn

L3   ANSWER 1 OF 1  REGISTRY  COPYRIGHT 2004 ACS on STN
RN   60-54-8  REGISTRY
CN   2-Naphthacenecarboxamide, 4-(dimethylamino)-1,4,4a,5,5a,6,11,12a-octahydro-
     3,6,10,12,12a-pentahydroxy-6-methyl-1,11-dioxo-, (4S,4aS,5aS,6S,12aS)-
     (9CI)  (CA INDEX NAME)
OTHER CA INDEX NAMES:
CN   2-Naphthacenecarboxamide, 4-(dimethylamino)-1,4,4a,5,5a,6,11,12a-octahydro-
     3,6,10,12,12a-pentahydroxy-6-methyl-1,11-dioxo-, [4S-
     (4α,4aα,5aα,6β,12aα)]-
CN   2-Naphthacenecarboxamide, 4-(dimethylamino)-1,4,4a,5,5a,6,11,12a-octahydro-
     3,6,10,12,12a-pentahydroxy-6-methyl-1,11-dioxo- (7CI, 8CI)
OTHER NAMES:
CN   (-)-Tetracycline
CN   Abramycin
CN   Achromycin
```

CN Achromycin (naphthacene derivative)
CN Agromicina
CN Ambramicina
CN Ambramycin
CN Bio-Tetra
CN Biocycline
CN Ciclibion
CN Cyclomycin
CN Cytome
CN Deschlorobiomycin
CN Enterocycline
CN Limecycline
CN Medocycline
CN Mericycline
CN Micycline
CN Neocycline
CN NSC 108579
CN Omegamycin
CN Orlycycline
CN Panmycin
CN Polycycline
CN Polycycline (antibiotic)
CN Resteclin
CN Roviciclina
CN Sumycin syrup
CN Tetra-Co
CN Tetracycline
CN Tetradecin
CN Tetrafil
CN Veracin
CN Vetacyclinum

=> e 10118-90-8
E1 1 10118-85-1/RN
E2 1 10118-89-5/RN
E3 1 --> 10118-90-8/RN
E4 1 10118-91-9/RN
E5 1 10118-92-0/RN
E6 1 101180-00-1/RN
E7 1 101180-01-2/RN
E8 1 101180-02-3/RN
E9 1 101180-03-4/RN
E10 1 101180-04-5/RN
E11 1 101180-05-6/RN
E12 1 101180-06-7/RN

=> s e3
L4 1 10118-90-8/RN

=> d rn cn

L4 ANSWER 1 OF 1 REGISTRY COPYRIGHT 2004 ACS on STN
RN **10118-90-8** REGISTRY
CN 2-Naphthacenecarboxamide, 4,7-bis(dimethylamino)-1,4,4a,5,5a,6,11,12a-octahydro-3,10,12,12a-tetrahydroxy-1,11-dioxo-, (4S,4aS,5aR,12aS)- (9CI) (CA INDEX NAME)
OTHER CA INDEX NAMES:

CN 2-Naphthacenecarboxamide, 4,7-bis(dimethylamino)-1,4,4a,5,5a,6,11,12a-octahydro-3,10,12,12a-tetrahydroxy-1,11-dioxo- (8CI)
CN 2-Naphthacenecarboxamide, 4,7-bis(dimethylamino)-1,4,4a,5,5a,6,11,12a-octahydro-3,10,12,12a-tetrahydroxy-1,11-dioxo-, [4S-(4α,4aα,5aα,12aα)]-
OTHER NAMES:
CN 7-Dimethylamino-6-demethyl-6-deoxytetracycline
CN CL 59806
CN Minocyclin
CN Minocycline
CN Minocyn
CN Tri-minocycline

=> file caplus; d que l10; d que l15
FILE 'CAPLUS' ENTERED AT 10:55:23 ON 09 JUN 2004
USE IS SUBJECT TO THE TERMS OF YOUR STN CUSTOMER AGREEMENT.
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FILE COVERS 1907 - 9 Jun 2004 VOL 140 ISS 24
FILE LAST UPDATED: 8 Jun 2004 (20040608/ED)

This file contains CAS Registry Numbers for easy and accurate substance identification.

L5	428	SEA FILE=REGISTRY ABB=ON PLU=ON	60-54-8/CRN
L6	33	SEA FILE=REGISTRY ABB=ON PLU=ON	10118-90-8/CRN
L7	4995	SEA FILE=CAPLUS ABB=ON PLU=ON	CATARACT+PFT/CT
L8	6944	SEA FILE=CAPLUS ABB=ON PLU=ON	CATARACT
L10	3	SEA FILE=CAPLUS ABB=ON PLU=ON	(L5 OR L6) AND (L7 OR L8)

L7	4995	SEA FILE=CAPLUS ABB=ON PLU=ON	CATARACT+PFT/CT
L8	6944	SEA FILE=CAPLUS ABB=ON PLU=ON	CATARACT
L11	23789	SEA FILE=CAPLUS ABB=ON PLU=ON	TETRACYCLINES+NT/CT
L12	23731	SEA FILE=CAPLUS ABB=ON PLU=ON	TETRACYCLIN? OR MINOCYCLIN? OR NSC 108579 OR CL 59806
L13	18	SEA FILE=CAPLUS ABB=ON PLU=ON	(L11 OR L12) AND (L7 OR L8)
L14	8	SEA FILE=CAPLUS ABB=ON PLU=ON	L13 AND (SINGLET OR THERMOGEL? OR HYDROPHOBIC OR TETRACYCLINE DERIV? OR OPACITY OR ANTIPHLOG? OR HYDROGELS)/TI
L15	7	SEA FILE=CAPLUS ABB=ON PLU=ON	L14 NOT LIDASE/TI

```
=> s l10 or l15
L50          10 L10 OR L15

=> file medline; d que l20; d que l22

 FILE LAST UPDATED: 8 JUN 2004 (20040608/UP). FILE COVERS 1951 TO DATE.

 On February 29, 2004, the 2004 MeSH terms were loaded. See HELP RLOAD
 for details. OLDMEDLINE now back to 1951.

 MEDLINE thesauri in the /CN, /CT, and /MN fields incorporate the
 MeSH 2004 vocabulary. See http://www.nlm.nih.gov/mesh/ and
 http://www.nlm.nih.gov/pubs/techbull/nd03/nd03_mesh.html for a
 description of changes.

 This file contains CAS Registry Numbers for easy and accurate
 substance identification.


L16        24368 SEA FILE=MEDLINE ABB=ON  PLU=ON  TETRACYCLINES+NT/CT
L17        14969 SEA FILE=MEDLINE ABB=ON  PLU=ON  CATARACT/CT
L19         2453 SEA FILE=MEDLINE ABB=ON  PLU=ON  L16 (L) AE/CT
L20            2 SEA FILE=MEDLINE ABB=ON  PLU=ON  L19 AND L17



L16        24368 SEA FILE=MEDLINE ABB=ON  PLU=ON  TETRACYCLINES+NT/CT
L17        14969 SEA FILE=MEDLINE ABB=ON  PLU=ON  CATARACT/CT
L21          842 SEA FILE=MEDLINE ABB=ON  PLU=ON  L17 (L) PC/CT
L22            1 SEA FILE=MEDLINE ABB=ON  PLU=ON  L21 AND L16


=> s l20 or l22
L51            3 L20 OR L22

=> file embase; d que l32; d que l37; d que l38
FILE 'EMBASE' ENTERED AT 10:56:22 ON 09 JUN 2004
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 FILE COVERS 1974 TO 4 Jun 2004 (20040604/ED)

 EMBASE has been reloaded. Enter HELP RLOAD for details.

 This file contains CAS Registry Numbers for easy and accurate
 substance identification.


L27        17297 SEA FILE=EMBASE ABB=ON  PLU=ON  CATARACT+NT/CT
L29        41743 SEA FILE=EMBASE ABB=ON  PLU=ON  TETRACYCLINE/CT OR MINOCYCLINE/
                 CT
L30         1796 SEA FILE=EMBASE ABB=ON  PLU=ON  L29 (L) AE/CT
L31         1170 SEA FILE=EMBASE ABB=ON  PLU=ON  L27 (L) SI/CT
L32            8 SEA FILE=EMBASE ABB=ON  PLU=ON  L30 AND L31



L27        17297 SEA FILE=EMBASE ABB=ON  PLU=ON  CATARACT+NT/CT
L29        41743 SEA FILE=EMBASE ABB=ON  PLU=ON  TETRACYCLINE/CT OR MINOCYCLINE/
```

```
                CT
L36          473 SEA FILE=EMBASE ABB=ON  PLU=ON  L27 (L) PC/CT
L37            1 SEA FILE=EMBASE ABB=ON  PLU=ON  L36 AND L29



L24        48250 SEA FILE=EMBASE ABB=ON  PLU=ON  TETRACYCLINE OR MINOCYCLINE
L27        17297 SEA FILE=EMBASE ABB=ON  PLU=ON  CATARACT+NT/CT
L28           45 SEA FILE=EMBASE ABB=ON  PLU=ON  L27 AND L24
L29        41743 SEA FILE=EMBASE ABB=ON  PLU=ON  TETRACYCLINE/CT OR MINOCYCLINE/
                CT
L30         1796 SEA FILE=EMBASE ABB=ON  PLU=ON  L29 (L) AE/CT
L31         1170 SEA FILE=EMBASE ABB=ON  PLU=ON  L27 (L) SI/CT
L32            8 SEA FILE=EMBASE ABB=ON  PLU=ON  L30 AND L31
L33           37 SEA FILE=EMBASE ABB=ON  PLU=ON  L28 NOT L32
L38            6 SEA FILE=EMBASE ABB=ON  PLU=ON  L33 AND (MATRIX OR LEPROSY OR
                CONGENITAL OR HYDROCHLORIDE OR HUMOR)/TI


=> s l32 or l37 or l38
L52           15 L32 OR L37 OR L38

=> file biosis; d que l44
FILE 'BIOSIS' ENTERED AT 10:58:28 ON 09 JUN 2004
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FILE COVERS 1969 TO DATE.
CAS REGISTRY NUMBERS AND CHEMICAL NAMES (CNs) PRESENT
FROM JANUARY 1969 TO DATE.

RECORDS LAST ADDED: 2 June 2004 (20040602/ED)

FILE RELOADED: 19 October 2003.


L5           428 SEA FILE=REGISTRY ABB=ON  PLU=ON  60-54-8/CRN
L6            33 SEA FILE=REGISTRY ABB=ON  PLU=ON  10118-90-8/CRN
L39        35855 SEA FILE=BIOSIS ABB=ON  PLU=ON  ?CATARACT? OR (LENS (3A)
                OPACIT? OR OPAQ? OR CLOUD?) OR  PSEUDOAPHAKIA
L40        24578 SEA FILE=BIOSIS ABB=ON  PLU=ON  TETRACYCLIN? OR MINOCYCLIN? OR
                NSC 108579 OR CL 59806
L41          691 SEA FILE=BIOSIS ABB=ON  PLU=ON  (L5 OR L6)
L42           43 SEA FILE=BIOSIS ABB=ON  PLU=ON  L39 AND (L40 OR L41)
L44            8 SEA FILE=BIOSIS ABB=ON  PLU=ON  L42 AND (OCULAR OR NEONATE OR
                LENS CHANGES OR MATRICES OR SINGLET OR VARIOUS OR INTENSIVE)/TI
                 NOT COBRA/TI


=> file wpix; d que l49
FILE 'WPIX' ENTERED AT 10:58:41 ON 09 JUN 2004
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FILE LAST UPDATED:          3 JUN 2004      <20040603/UP>
MOST RECENT DERWENT UPDATE:     200435        <200435/DW>
DERWENT WORLD PATENTS INDEX SUBSCRIBER FILE, COVERS 1963 TO DATE

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    PLEASE VISIT:
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>>> THE DISPLAY LAYOUT HAS BEEN CHANGED TO ACCOMODATE THE NEW FORMAT GERMAN PATENT APPLICATION AND PUBLICATION NUMBERS. SEE ALSO:
http://www.stn-international.de/archive/stnews/news0104.pdf <<<

>>> SINCE THE FILE HAD NOT BEEN UPDATED BETWEEN APRIL 12-16 THERE WAS NO WEEKLY SDI RUN <<<

L45 36101 SEA FILE=WPIX ABB=ON PLU=ON ?CATARACT? OR (LENS (3A) OPACIT? OR OPAQ? OR CLOUD?) OR PSEUDOAPHAKIA
L46 2934 SEA FILE=WPIX ABB=ON PLU=ON TETRACYCLIN? OR MINOCYCLIN? OR NSC 108579 OR CL 59806 OR NSC 108 579 OR CL 59 906 OR TETRA CYCLIN? OR MINO CYCLIN?
L47 14 SEA FILE=WPIX ABB=ON PLU=ON L45 AND L46
L49 3 SEA FILE=WPIX ABB=ON PLU=ON L47 AND (OCULAR OR ULCERS OR OSMOTIC)/TI

=> dup rem l51 l50 l52 l44 l49
FILE 'MEDLINE' ENTERED AT 10:58:59 ON 09 JUN 2004

FILE 'CAPLUS' ENTERED AT 10:58:59 ON 09 JUN 2004
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PROCESSING COMPLETED FOR L51
PROCESSING COMPLETED FOR L50
PROCESSING COMPLETED FOR L52

PROCESSING COMPLETED FOR L44
PROCESSING COMPLETED FOR L49
L53 36 DUP REM L51 L50 L52 L44 L49 (3 DUPLICATES REMOVED)
ANSWERS '1-3' FROM FILE MEDLINE
ANSWERS '4-13' FROM FILE CAPLUS
ANSWERS '14-28' FROM FILE EMBASE
ANSWERS '29-33' FROM FILE BIOSIS
ANSWERS '34-36' FROM FILE WPIX

=> d ibib ed ab l53 1-33; d ibib ab abex l53 34-36

L53 ANSWER 1 OF 36 MEDLINE on STN
ACCESSION NUMBER: 85233609 MEDLINE
DOCUMENT NUMBER: PubMed ID: 3159698
TITLE: Isotretinoin and tetracycline in the management of severe nodulocystic acne.
AUTHOR: Lester R S; Schachter G D; Light M J
SOURCE: International journal of dermatology, (1985 May) 24 (4) 252-7.
Journal code: 0243704. ISSN: 0011-9059.
PUB. COUNTRY: United States
DOCUMENT TYPE: (CLINICAL TRIAL)
Journal; Article; (JOURNAL ARTICLE)
(RANDOMIZED CONTROLLED TRIAL)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198508
ENTRY DATE: Entered STN: 19900320
Last Updated on STN: 19950206
Entered Medline: 19850809
ED Entered STN: 19900320
Last Updated on STN: 19950206
Entered Medline: 19850809
AB Thirty patients with treatment-resistant cystic and conglobulate acne entered a randomized double-blind protocol, testing the efficacy of isotretinoin versus tetracycline. After 16 weeks of isotretinoin treatment, the mean number of cysts decreased by 64% and the mean sum of the longest diameters was reduced by 68%. After 16 weeks of tetracycline therapy, the total number of cysts showed a mean decrease of 52%, and the mean sum of the longest diameters decreased by 60%. The reduction in the number of cysts and the sum of their longest diameters that occurred after 16 weeks of treatment was statistically significant for each of the treatment groups, but there was no statistically significant difference between the treatment groups at the end of therapy. Eight weeks after the discontinuation of treatment in the isotretinoin group, there was an overall reduction from baseline of 82% in the cyst count and 88% in the sum of the longest diameters. In the tetracycline treatment group, the overall reduction from baseline in the cyst count was 54% and in the sum of the longest diameters, 60%. This led to a statistically significant difference in the two treatment groups at 24 weeks. All patients on isotretinoin experienced side effects that were primarily related to the integumentary system but necessitated discontinuation of the drug for a short period of time in only one patient. Long-term follow-up, 8 months after discontinuation of the study, showed a prolonged significant remission of acne in the isotretinoin group but not in the tetracycline group.

L53 ANSWER 2 OF 36 MEDLINE on STN

ACCESSION NUMBER: 78190004 MEDLINE
DOCUMENT NUMBER: PubMed ID: 350505
TITLE: Systemic complications of commonly used dermatologic drugs.
AUTHOR: Gruber G G; Callen J P
SOURCE: Cutis; cutaneous medicine for the practitioner, (1978 Jun) 21 (6) 825-9. Ref: 58
Journal code: 0006440. ISSN: 0011-4162.
PUB. COUNTRY: United States
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
General Review; (REVIEW)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 197808
ENTRY DATE: Entered STN: 19900314
Last Updated on STN: 19900314
Entered Medline: 19780828
ED Entered STN: 19900314
Last Updated on STN: 19900314
Entered Medline: 19780828
AB Systemic complications of drugs commonly prescribed by dermatologists fortunately are uncommon. Nevertheless, it is extremely important that the dermatologist be aware of medical contraindications to the use of these agents, as well as their potential systemic side effects. These considerations for methotrexate, sulfones, tetracyclines, and corticosteroids are reviewed.

L53 ANSWER 3 OF 36 MEDLINE on STN
ACCESSION NUMBER: 73252102 MEDLINE
DOCUMENT NUMBER: PubMed ID: 4666783
TITLE: Mass control of communicable eye disease.
AUTHOR: Maichuk I F
SOURCE: Bulletin of the Ophthalmological Society of Egypt, (1972) 65 (69) 283-91.
Journal code: 7507035. ISSN: 0078-5342.
PUB. COUNTRY: Egypt
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 197311
ENTRY DATE: Entered STN: 19900310
Last Updated on STN: 19900310
Entered Medline: 19731112
ED Entered STN: 19900310
Last Updated on STN: 19900310
Entered Medline: 19731112

L53 ANSWER 4 OF 36 CAPLUS COPYRIGHT 2004 ACS on STN DUPLICATE 1
ACCESSION NUMBER: 1987:212011 CAPLUS
DOCUMENT NUMBER: 106:212011
TITLE: Photosensitized generation of **singlet** molecular oxygen by endogenous photosensitizers of the human lens
AUTHOR(S): Egorov, S. Yu.; Babizhaev, M. A.; Krasnovsky, A. A., Jr.; Shvedova, A. A.
CORPORATE SOURCE: Biol. Dep., M. V. Lomonosov Moscow State Univ., Moscow, USSR
SOURCE: Biofizika (1987), 32(1), 169-71
CODEN: BIOFAI; ISSN: 0006-3029

DOCUMENT TYPE: Journal
LANGUAGE: Russian
ED Entered STN: 26 Jun 1987
AB Kynurenine derivs., harmane (β-carboline), and **tetracycline** hydrochloride, known photosensitizers of cataractogenesis in lens, produced singlet O (1O2) under photoexcitation in air-saturated aqueous (D2O) solution The quantum yields of the 1O2 generation by these substances are determined It is suggested that 1O2 might take part in cataractogenesis.

L53 ANSWER 5 OF 36 CAPLUS COPYRIGHT 2004 ACS on STN DUPLICATE 2
ACCESSION NUMBER: 1980:460992 CAPLUS
DOCUMENT NUMBER: 93:60992
TITLE: Distribution of tetracycline in lens proteins after intensive topical administration
AUTHOR(S): Brettschneider, Ivo; Krejci, Lubomir
CORPORATE SOURCE: Inst. Exp. Med., Czech. Acad. Sci., Prague, Czech.
SOURCE: Ophthalmic Research (1980), 12(1), 54-6
CODEN: OPRSAQ; ISSN: 0030-3747
DOCUMENT TYPE: Journal
LANGUAGE: English
ED Entered STN: 12 May 1984
AB The distribution and affinity of topically administered tetracycline-HCl (I-HCl) [**64-75-5**] to specific protein fractions of crystalline lens was investigated in young rabbits. Hydrophilic contact lenses were used for drug application and radioactive I for detection of the antibiotic in crystalline lens proteins. The highest amount of I was bound in urea-soluble and water-soluble protein fractions of the lens cortex and nucleus. Apparently, after intensive topical application, I is directly bound on the lens proteins and may therefore induce **cataract** formation.

L53 ANSWER 6 OF 36 CAPLUS COPYRIGHT 2004 ACS on STN
ACCESSION NUMBER: 2000:227458 CAPLUS
DOCUMENT NUMBER: 132:260702
TITLE: **Tetracycline derivatives** for inhibition of **cataract** formation
INVENTOR(S): Ryan, Maria Emanuel; Golub, Lorne M.; Ramamurthy, Nungavaram S.
PATENT ASSIGNEE(S): The Research Foundation of State University of New York, USA
SOURCE: PCT Int. Appl., 38 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2000018353	A2	20000406	WO 1999-US22354	19990928
WO 2000018353	A3	20000706		

W: AE, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU, CZ, DE, DK, DM, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
RW: GH, GM, KE, LS, MW, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE,

DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG

CA 2343038	AA	20000406	CA 1999-2343038	19990928
EP 1124558	A2	20010822	EP 1999-949910	19990928
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO				
JP 2002525299	T2	20020813	JP 2000-571875	19990928
AU 759372	B2	20030410	AU 1999-62684	19990928
NZ 510628	A	20030829	NZ 1999-510628	19990928
PRIORITY APPLN. INFO.:			US 1998-102056P P	19980928
			WO 1999-US22354 W	19990928

OTHER SOURCE(S): MARPAT 132:260702
ED Entered STN: 07 Apr 2000
AB Methods of reducing the risk of **cataract** development in a mammal are provided and include administering to the mammal an effective amount of a **tetracycline** derivative A preferred **tetracycline** derivative is 6α-deoxy-5-hydroxy-4-dedimethylaminotetracycline.

L53 ANSWER 7 OF 36 CAPLUS COPYRIGHT 2004 ACS on STN
ACCESSION NUMBER: 1997:784148 CAPLUS
DOCUMENT NUMBER: 128:39607
TITLE: Ophthalmic preparations containing protein formation-inhibiting antibiotics for prevention of corneal **opacity** after eye surgery
INVENTOR(S): Kita, Kiyoshi
PATENT ASSIGNEE(S): Kita Y. K., Japan
SOURCE: Jpn. Kokai Tokkyo Koho, 4 pp.
CODEN: JKXXAF
DOCUMENT TYPE: Patent
LANGUAGE: Japanese
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
JP 09315954	A2	19971209	JP 1996-172745	19960530
PRIORITY APPLN. INFO.:			JP 1996-172745	19960530

ED Entered STN: 15 Dec 1997
AB Eye drops or ophthalmic ointments containing protein formation-inhibiting antibiotics (e.g. aminoglycoside antibiotics, **tetracyclines**, macrolide antibiotics, lincomycins, and/or chloramphenicols) are useful for prevention of corneal opacity after surgery of **cataract**, glaucoma, etc. Eye drops containing erythromycin lactobionate effectively reduced postoperative opacification of lenses of rabbits.

L53 ANSWER 8 OF 36 CAPLUS COPYRIGHT 2004 ACS on STN
ACCESSION NUMBER: 1996:425317 CAPLUS
DOCUMENT NUMBER: 125:67761
TITLE: Lyophilized preparation providing reversibly **thermogelling** water-base medicinal composition
INVENTOR(S): Takeuchi, Masanobu; Takahashi, Hiroe; Takahashi, Toshie; Maruyama, Hiroki; Fukushima, Miyako; Masuda, Keiko; Oguma, Touru; Maeda, Makoto
PATENT ASSIGNEE(S): Wakamoto Pharmaceutical Co., Ltd., Japan
SOURCE: PCT Int. Appl., 25 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: Japanese

FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9611672	A1	19960425	WO 1994-JP1709	19941013
W: AU, CA, CN, FI, HU, JP, KR, NO, RU, US				
RW: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE				
CA 2202520	AA	19960425	CA 1994-2202520	19941013
AU 9478629	A1	19960506	AU 1994-78629	19941013
AU 684558	B2	19971218		
EP 782850	A1	19970709	EP 1994-929646	19941013
R: AT, CH, DE, DK, ES, FR, GB, IT, LI, NL, SE				
CN 1164185	A	19971105	CN 1994-195183	19941013
FI 9701533	A	19970411	FI 1997-1533	19970411
NO 9701683	A	19970612	NO 1997-1683	19970411
US 5756552	A	19980526	US 1997-809604	19970414
PRIORITY APPLN. INFO.:			WO 1994-JP1709	19941013

ED Entered STN: 19 Jul 1996
AB A lyophilized preparation of a reversibly thermogelling water-base composition comprises an ED of a medicine, 0.2 - 2.1 % (w/v) of methylcellulose (containing 26 - 33 % of methoxyl groups), 1.2 - 2.3 % (w/v) of citric acid, and 0.5 - 13 % (w/v) of polyethylene glycol. This preparation serves to keep a moisture-sensitive medicine stable till the time of its use and can be converted into a composition which reversibly gels upon heating when applied to the affected part by adding a suitable amount of a solvent.

L53 ANSWER 9 OF 36 CAPLUS COPYRIGHT 2004 ACS on STN
ACCESSION NUMBER: 1991:589749 CAPLUS
DOCUMENT NUMBER: 115:189749
TITLE: Protease inhibitor-containing antiexudative, **antiphlogistic**, and antimicrobial topical pharmaceutical compositions
INVENTOR(S): Cejkova, Jitka; Vacik, Jiri; Lojda, Zdenek
PATENT ASSIGNEE(S): Ceskoslovenska Akademie Ved, Czech.
SOURCE: Eur. Pat. Appl., 7 pp.
CODEN: EPXXDW
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
EP 420600	A2	19910403	EP 1990-310516	19900926
EP 420600	A3	19921119		
EP 420600	B1	19970416		
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE				
CS 275231	B2	19920219	CS 1989-5552	19890929
CA 2026166	AA	19910330	CA 1990-2026166	19900925
AU 9063170	A1	19910411	AU 1990-63170	19900926
US 5244673	A	19930914	US 1990-588322	19900926
AT 151640	E	19970515	AT 1990-310516	19900926
PRIORITY APPLN. INFO.:			CS 1989-5552	19890929

ED Entered STN: 01 Nov 1991
AB A protease inhibitor (e.g. aprotinin, soy bean trypsin inhibitor, or elastatinal) is included in antiexudative, antiphlogistic, and antimicrobial compns.; the compns. are applicable as ophthalmol.,

otolaryngol., or dematol. pharmaceuticals. The composition may also include a steroidal (e.g. dexamethasone) or nonsteroidal (e.g. indomethacin) antiphlogistic agent and/or antibiotic (neomycin, bacitracin, etc.). Formulations (eye drop, contact lens, etc.) are given. A formulation containing aprotinin and indomethacin, instilled 4 times daily, reduced eye ball irritation following **cataract** extraction

L53 ANSWER 10 OF 36 CAPLUS COPYRIGHT 2004 ACS on STN
ACCESSION NUMBER: 1987:583618 CAPLUS
DOCUMENT NUMBER: 107:183618
TITLE: Sustained-release **hydrogels** containing amino acid functionalized units for ophthalmic or other use
INVENTOR(S): Bawa, Rajan
PATENT ASSIGNEE(S): Bausch and Lomb Inc., USA
SOURCE: Eur. Pat. Appl., 34 pp.
CODEN: EPXXDW
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
EP 219208	A2	19870422	EP 1986-306348	19860815
EP 219208	A3	19880601		
EP 219208	B1	19920624		
R: BE, CH, DE, FR, GB, IT, LI, NL, SE				
US 4668506	A	19870526	US 1985-766741	19850816
CA 1277236	A1	19901204	CA 1986-515033	19860731
JP 62103029	A2	19870513	JP 1986-190686	19860815

PRIORITY APPLN. INFO.: US 1985-766741 19850816
ED Entered STN: 14 Nov 1987
AB Sustained release hydrogels contain a drug in a polymer composed of acrylates which are hydrophilic, acrylates functionalized by an amino acid, and cross-linking agents. These hydrogels are especially useful as ophthalmic inserts or medicated contact lenses. Solution A is prepared from 2-hydroxyethyl methacrylate 85.3, isobornyl methacrylate 10, methacroyl glycine 6, and ethylene glycol dimethacrylate 0.5 g, and benzoin Me ether 0.5 g is added. Solution B is the same as solution A except pitocarpine HCl (I)
11.43 g is added. A triple layer contact lens is made by spincasting 9.8 μL solution A; injecting 29.4 μL solution B on the resulting polymer, spincasting, and injecting 9.8 .mL solution A on the resulting 2-layer polymer. The resulting triple-spun contact lens has a polymer-drug layer encapsulated between 2 non-drug polymer layers. This composition released I into distilled water relatively rapidly for the first .apprx.20 h, and then released the drug at .apprx.0.4 mg/h until .apprx.170 h, when testing was stopped. Solution A was also polym. and the polymer was soaked in I to give another sustained-release composition, which had similar release characteristics to I-soaked Ocusert-20 after the first .apprx.15 h.

L53 ANSWER 11 OF 36 CAPLUS COPYRIGHT 2004 ACS on STN
ACCESSION NUMBER: 1987:521147 CAPLUS
DOCUMENT NUMBER: 107:121147
TITLE: Sustained-release **hydrophobic** polymers and their use in contact lenses
INVENTOR(S): Bawa, Rajan
PATENT ASSIGNEE(S): Bausch and Lomb Inc., USA

SOURCE: Eur. Pat. Appl., 19 pp.
CODEN: EPXXDW
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
EP 219207	A2	19870422	EP 1986-306346	19860815
EP 219207	A3	19880601		
EP 219207	B1	19920701		
R: BE, CH, DE, FR, GB, IT, LI, NL, SE				
CA 1295941	A1	19920218	CA 1986-515034	19860731
JP 62103028	A2	19870513	JP 1986-190685	19860815

PRIORITY APPLN. INFO.: US 1985-766735 19850816
ED Entered STN: 05 Oct 1987
AB Crossed-linked sustained-release hydrophobic polymers, which may also contain hydrophilic monomers, are useful for topical, systemic, and transdermal drug delivery. They are especially useful as contact lenses which may correct vision as well as delivering the drug. Solution A, containing methacryloxypropyltris(trimethylsiloxy)silane 42, triethylene glycol dimethacrylate 23.5, cyclohexyl methacrylate 21 g, methacrylic acid 8, Me methacrylate 5, and 2,2'-azobis(isobutylate) 0.49 and 1,4-p-toluidino anthraquinone 0.01 g is prepared Mixture B contains solution A 2 and pilocarpine HCl (I) 0.2 g as a dispersion. Solution A is cured by UV and mixture B is poured on top of solution A and cured. The film is lathed to obtain a contact lens with a clear center and drug particles in the periphery. A single layer polymer prepared from mixture B showed an average release of I of 1-3 μg/h over the time period 160-500 h in buffered saline.

L53 ANSWER 12 OF 36 CAPLUS COPYRIGHT 2004 ACS on STN
ACCESSION NUMBER: 1981:168002 CAPLUS
DOCUMENT NUMBER: 94:168002
TITLE: Adverse effects of tetracycline on eye tissues in fetuses, newborns and adults under various routes of administration
AUTHOR(S): Krejci, Lubomir; Brettschneider, Ivo; Triska, Jaromir; Tolarova, Marie
CORPORATE SOURCE: Ocni Klin. Fak. Detskeho Lekarstvi, Univ. Karlovy, Karlovy Vary, Czech.
SOURCE: Farmakoterapeuticke Zpravy (1980), 26(3), 239-50
CODEN: FAZPAN; ISSN: 0428-0288
DOCUMENT TYPE: Journal
LANGUAGE: Czech
ED Entered STN: 12 May 1984
AB After topical application of tetracycline-HCl (I-HCl) [**64-75-5**] corneal and lenticular **cataracts** from I diposition were observed Analogous lesions were found in the corneas and lenses of embryos of exptl. animals whose mothers were treated with I-HCl (i.m.) at various stages of pregnancy. Similar findings were observed in the fetuses of women treated with I at early stages of pregnancy. No such lesions were found in sucklings. I firmly bound to lenticular protein fractions. I is potentially cataractogenic.

L53 ANSWER 13 OF 36 CAPLUS COPYRIGHT 2004 ACS on STN

ACCESSION NUMBER: 1976:140664 CAPLUS
DOCUMENT NUMBER: 84:140664
TITLE: Effect of drug vehicle on human ocular retention of topically applied tetracycline
AUTHOR(S): Massey, James Y.; Hanna, Calvin; Goodart, Roy; Wallace, Thomas
CORPORATE SOURCE: Med. Cent., Univ. Arkansas, Little Rock, AR, USA
SOURCE: American Journal of Ophthalmology (1976), 81(2), 151-6
CODEN: AJOPAA; ISSN: 0002-9394
DOCUMENT TYPE: Journal
LANGUAGE: English
ED Entered STN: 12 May 1984
AB A 2% tetracycline HCl (I·HCl)(II) [**64-75-5**] ointment produced higher tear film levels of II than a 1% suspension in oil, a 1% suspension in ointment, or a 1 and a 2% solution in water (or balanced salt solution USP); II was applied once to conjunctival cul-de-sacs of volunteers and patients before **cataract** extraction The tear film concns. of II were maintained above a bacteriostatic level for >6 hr for 1 and 2% II in ointment, <2 hr for 1% II in oil, and <30 min for 1 and 2% II in water or balanced salt solution The 1% II in oil induced excessive lacrimation and much of II was washed from the conjunctival surface. The levels of II in the aqueous humor were related to the tear film levels. Bacteriostatic levels of II were maintained in the aqueous humor for 1.5 hr after application of 2% II in ointment, whereas 1% II in ointment produced II levels approaching bacteriostasis in the aqueous humor and 1% II in oil produced only trace levels of II within the anterior chamber. The ointment acted as a depot for the suspended II and most of II in the absence of excessive tearing was lost from the conjunctiva via the lacrimal system.

L53 ANSWER 14 OF 36 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN DUPLICATE 3
ACCESSION NUMBER: 78412406 EMBASE
DOCUMENT NUMBER: 1978412406
TITLE: **Tetracycline hydrochloride** and lens changes.
AUTHOR: Krejci L.; Brettschneider I.; Triska J.
CORPORATE SOURCE: II Dept. Ophthalmol., Charles Univ., Czech. Acad. Sci., Prague, Czechoslovakia
SOURCE: Ophthalmic Research, (1978) 10/1 (36-40).
CODEN: OPRSAQ
COUNTRY: Switzerland
DOCUMENT TYPE: Journal
FILE SEGMENT: 037 Drug Literature Index
012 Ophthalmology
030 Pharmacology
004 Microbiology
LANGUAGE: English
AB Intensive topical administration of **tetracycline** hydrochloride by means of hydrophilic contact lenses resulted in lens changes - opacities and coloration - in young rabbits. The presence of TTC deposits was proved by spectrophotometry. The high fluorescence of the cryostat-thin lens sections in ultraviolet light, particularly in nuclear areas and between the lens fibers indicates the presence of oxidized and degraded TTC deposits. These results suggest that intensive topical application of the widely used antibiotic TTC may impair lens transparency, cause lens discoloration and induce cataract formation by a direct influence on the lens proteins.

L53 ANSWER 15 OF 36 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2004205617 EMBASE
TITLE: Diagnosis and Treatment of Acne.
AUTHOR: Feldman S.; Careccia R.E.; Barham K.L.; Hancox J.
CORPORATE SOURCE: Dr. S. Feldman, Wake Forest Univ. School of Medicine, Department of Dermatology, Medical Center Boulevard, Winston-Salem, NC 27157-1071, United States. sfeldman@wfubmc.edu
SOURCE: American Family Physician, (1 May 2004) 69/9 (2123-2130+2135-2136).
Refs: 31
ISSN: 0002-838X CODEN: AFPYAE
COUNTRY: United States
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 013 Dermatology and Venereology
036 Health Policy, Economics and Management
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English

AB Acne can cause significant embarrassment and anxiety in affected patients. It is important for family physicians to educate patients about available treatment options and their expected outcomes. Topical retinoids, benzoyl peroxide, sulfacetamide, and azelaic acid are effective in patients with mild or moderate comedones. Topical erythromycin of clindamycin can be added in patients with mild to moderate inflammatory acne or mixed acne. A six-month course of oral erythromycin, doxycycline, tetracycline, or minocycline can be used in patients with moderate to severe inflammatory acne. A low-androgen oral contraceptive pill is effective in women with moderate to severe acne. Isotretinoin is reserved for use in the treatment of the most severe or refractory cases of inflammatory acne. Because of its poor side effect profile and teratogenicity, isotretinoin (Accutane) must by prescribed by a physician who is a registered member of the manufacturer's System to Manage Accutane-Related Teratogenicity program. Copyright.COPYRGT. 2004 American Academy of Family Physicians.

L53 ANSWER 16 OF 36 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2004082889 EMBASE
TITLE: Blistering diseases in the elderly: Diagnosis and treatment.
AUTHOR: Sami N.; Yeh S.W.; Ahmed A.R.
CORPORATE SOURCE: Dr. A.R. Ahmed, Dept. Oral Med., Infect. and Immun., Harvard School of Dental Medicine, 188 Longwood Avenue, Boston, MA 02115, United States. Razzaque_Ahmed@hms.harvard.edu
SOURCE: Dermatologic Clinics, (2004) 22/1 (73-86).
Refs: 100
ISSN: 0733-8635 CODEN: DRMCDJ
COUNTRY: United States
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 013 Dermatology and Venereology
020 Gerontology and Geriatrics
036 Health Policy, Economics and Management
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English

SUMMARY LANGUAGE: English

AB This article discusses the major blistering diseases in the geriatric population. The diagnosis of both immune- and non-immune-mediated blistering disorders can be confirmed with the help of histologic and immunopathologic studies. Various serologic assays, which are more specific, also can be used to confirm the diagnosis of autoimmune blistering diseases. These techniques have facilitated the diagnosis and allowed the institution of early treatment. The treatment of blistering disorders has included both localized and systemic treatments. Localized treatment involves topical care including the following measures: the prevention of trauma; soaking of blisters in antiseptic (potassium permanganate or aluminum subacetate) solutions; topical and intralesional corticosteroids; and the prevention and early treatment of infections with local or systemic antibiotics. Conventional oral systemic therapies that have proved to be beneficial include systemic corticosteroids, anti-inflammatory agents, and immunosuppressive agents. Because the elderly are more prone to the side effects of these systemic agents, it is crucial that routine hematologic tests be done and monitored until the treatments have been discontinued. Recently, newer alternative treatment modalities have proved to be successful in patients who failed to respond or developed multiple side effects to the conventional oral systemic agents. In conclusion, as clinicians gain a greater understanding into the pathogenesis of these diseases, more specific molecular-targeted treatments will most likely become available.

L53 ANSWER 17 OF 36 EMBASE on STN

ACCESSION NUMBER: 2003514208 EMBASE
TITLE: Guidelines for the management of pemphigus vulgaris.
AUTHOR: Harman K.E.; Albert S.; Black M.M.
CORPORATE SOURCE: Dr. K.E. Harman, Dept. of Dermatology, Leicester Royal Infirmary, Leicester, LE1 5WW, United Kingdom. karenharman@doctors.org.uk
SOURCE: British Journal of Dermatology, (2003) 149/5 (926-937). Refs: 112
ISSN: 0007-0963 CODEN: BJDEAZ
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 013 Dermatology and Venereology
026 Immunology, Serology and Transplantation
036 Health Policy, Economics and Management
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English

AB These guidelines for management of pemphigus vulgaris have been prepared for dermatologists on behalf of the British Association of Dermatologists. They present evidence-based guidance for treatment, with identification of the strength of evidence available at the time of preparation of the guidelines, and a brief overview of epidemiological aspects, diagnosis and investigation.

L53 ANSWER 18 OF 36 EMBASE on STN

ACCESSION NUMBER: 2003345699 EMBASE
TITLE: Rheumatoid arthritis in the developing world.
AUTHOR: Kalla A.A.; Tikly M.
CORPORATE SOURCE: Dr. A.A. Kalla, Department of Medicine, Groote Schuur

Hospital, University of Cape Town, Observatory, Cape Town 7925, South Africa. kallaa@iafrica.com
SOURCE: Bailliere's Best Practice and Research in Clinical Rheumatology, (2003) 17/5 (863-875).
Refs: 52
ISSN: 1521-6942 CODEN: BBPRFF
COUNTRY: United Kingdom
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 031 Arthritis and Rheumatism
017 Public Health, Social Medicine and Epidemiology
037 Drug Literature Index
036 Health Policy, Economics and Management
038 Adverse Reactions Titles
029 Clinical Biochemistry
030 Pharmacology
LANGUAGE: English
SUMMARY LANGUAGE: English

AB The general impression is that rheumatoid arthritis (RA) has a lower prevalence and a milder course in developing countries. Epidemiological studies from different regions show that varying prevalence is possibly related to urbanization. The data suggest that where severe disability does occur, it presents a significant health challenge because of scarce medical and social resources. Disease-modifying anti-rheumatic drugs (DMARDs) remain the mainstay of therapy to alter the natural history of the disease. New therapies are unlikely to be of general benefit in the developing world because of financial constraints and increased risk of infections, particularly tuberculosis, associated with the use of tumour necrosis factor-α blockers. Instead, future research in poorer communities should be directed at assessing the burden of disease, the role of early aggressive therapy with DMARDs in combination with glucocorticoids for the majority of patients with RA, and finally, sourcing targeted biological therapies through clinical trials and grants for compassionate use in patients with refractory disease.

L53 ANSWER 19 OF 36 EMBASE
on STN

ACCESSION NUMBER: 2003171428 EMBASE
TITLE: Regulated over-expression of DNA polymerase β mediates early onset cataract in mice.
AUTHOR: Sobol R.W.; Foley J.F.; Nyska A.; Davidson M.G.; Wilson S.H.
CORPORATE SOURCE: S.H. Wilson, Laboratory of Structural Biology, Natl. Inst. of Environ. Hlth. Sci., Research Triangle Park, NC 27709, United States. wilson5@niehs.nih.gov
SOURCE: DNA Repair, (13 May 2003) 2/5 (609-622).
Refs: 46
ISSN: 1568-7864 CODEN: DRNEAR
COUNTRY: Netherlands
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: 012 Ophthalmology
029 Clinical Biochemistry
037 Drug Literature Index
LANGUAGE: English
SUMMARY LANGUAGE: English

AB Base excision repair (BER) is a tightly coordinated mechanism for repair of DNA base damage (via alkylation and oxidation) and base loss. From E. coli to yeast to human cells, subtle alterations in expression of BER proteins lead to mutagenic or genome instability phenotypes. DNA

polymerase β (β-pol), the major BER polymerase, has been found to be over-expressed in human tumor tissues and more recently it has been shown that over-expression of β-pol results in a mutator and genome instability phenotype. These previous reports imply that β-pol over-expression is deleterious and suggests that such an imbalance may cause an overall functional deficiency in the BER pathway. In the present study, we have developed a bicistronic tetracycline-responsive transgenic system to over-express β-pol in mice. We find that over-expression of β-pol in the lens epithelium results in the early onset of severe cortical cataract, with cataractogenesis beginning within 4 days after birth. In utero and post-natal suppression of transgenic Flag-β-pol expression by doxycycline administration completely prevents cataract formation through adulthood, yet cataract is subsequently observed following removal of doxycycline and re-expression of the transgene. Cataract development accompanies increased expression of cyclooxygenase-2 in the lenticular fibers of the lens, implicating oxidative stress in the development of this cataractous phenotype. Although the mechanism for the transgene mediated cataractogenesis is not clear at this time, it is nevertheless intriguing that increased expression of β-pol leads to such a phenotype. These results suggest that either a β-pol expression imbalance negatively affects overall fidelity and/or BER capacity or that β-pol has a role in lens epithelial cell differentiation.

L53 ANSWER 20 OF 36 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2003459244 EMBASE
TITLE: New Concepts in the Treatment of Rheumatoid Arthritis.
AUTHOR: Goldbach-Mansky R.; Lipsky P.E.
CORPORATE SOURCE: R. Goldbach-Mansky, Office of the Clinical Director, Natl. Inst. Arthr. Musculoskel. S., National Institutes of Health, Bethesda, MD 20892, United States. goldbacr@mail.nih.gov
SOURCE: Annual Review of Medicine, (2003) 54/- (197-216).
Refs: 108
ISSN: 0066-4219 CODEN: ARMCAH
COUNTRY: United States
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 031 Arthritis and Rheumatism
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English

AB Recent advances have made rheumatoid arthritis (RA) amenable to treatment. Clinical studies in patients with early and established RA have broadened understanding of its pathogenesis and have fundamentally changed the therapeutic approach to this disease. Quantum leaps in therapy - including the use of early, aggressive therapy, combination therapy, and the introduction of anti-cytokine agents - have improved patients' quality of life, eased clinical symptoms, retarded the progression of joint destruction, and delayed disability. We review clinical evidence supporting these therapeutic approaches. Diagnostic and therapeutic challenges are highlighted, and a decision tree to guide treatment in patients with early or established RA is provided.

L53 ANSWER 21 OF 36 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2002456346 EMBASE

TITLE: Development of **matrix** metalloproteinase inhibitors in cancer therapy.
AUTHOR: Purcell W.T.; Rudek M.A.; Hidalgo M.
CORPORATE SOURCE: Dr. M. Hidalgo, Sidney Kimmel Compreh. Cancer Center, Johns Hopkins Div. of Med. Oncology, Baltimore, MD 21231-2410, United States. mhidalgl@jhmi.edu
SOURCE: Hematology/Oncology Clinics of North America, (2002) 16/5 (1189-1227).
Refs: 196
ISSN: 0889-8588 CODEN: HCNAEQ
PUBLISHER IDENT.: S 0889-8588(02)00044-8
COUNTRY: United States
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 016 Cancer
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English
AB The matrix metalloproteinases represent an attractive target for cancer treatment, and a number of matrix metalloproteinase inhibitors are undergoing clinical trials. The results of these studies will establish whether any of these compounds are therapeutically useful. Independent of the conclusions from the first generation of studies, the field of matrix metalloproteinase inhibitors remains attractive for creative and innovative research. In the future, the development of novel, less toxic, and more effective matrix metalloproteinase inhibitors, and the combination of conventional agents with these novel anticancer agents will constitute the main focus of research efforts.

L53 ANSWER 22 OF 36 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2003025624 EMBASE
TITLE: [Bullous autoimmune dermatoses. Part 3: Diagnosis and therapy].
BULLOSE AUTOIMMUNDERMATOSEN. TEIL 3: DIAGNOSTIK UND THERAPIE.
AUTHOR: Hertl M.; Schuler G.
CORPORATE SOURCE: . Michael.hertl@derma.imed.uni-erlangen.de
SOURCE: Hautarzt, (2002) 53/5 (352-366).
Refs: 43
ISSN: 0017-8470 CODEN: HAUTAW
COUNTRY: Germany
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 013 Dermatology and Venereology
026 Immunology, Serology and Transplantation
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: German

L53 ANSWER 23 OF 36 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 2002031115 EMBASE
TITLE: Intravenous immunoglobulin therapy for patients with pemphigus foliaceus unresponsive to conventional therapy.
AUTHOR: Ahmed A.R.; Sami N.
CORPORATE SOURCE: Dr. A.R. Ahmed, Department of Oral Medicine, Harvard School of Dental Medicine, 188 Longwood Ave, Boston, MA 02115,

United States
SOURCE: Journal of the American Academy of Dermatology, (2002) 46/1 (42-49).
Refs: 57
ISSN: 0190-9622 CODEN: JAADDB
COUNTRY: United States
DOCUMENT TYPE: Journal; Article
FILE SEGMENT: 013 Dermatology and Venereology
026 Immunology, Serology and Transplantation
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English

AB Background: Pemphigus foliaceus (PF) is a chronic autoimmune blistering skin disease that is commonly treated with oral corticosteroids and immunosuppressive therapy. In some patients, PF can be refractory to treatment and the resultant side effects of prolonged immune suppression can be potentially fatal. Alternative therapies are needed. Objective: The purpose of this study is to report treatment outcomes with Mg therapy in 11 patients with severe PF refractory to prednisone and other immunosuppressive therapy Methods: Selection criteria included documentation of a biopsy and immunopathology in 11 patients who were resistant to treatment or experienced side effects to conventional therapy. Mg was administered according to a defined protocol. The parameters used to assess clinical response to Mg included time observed for effective control of disease, duration of Mg maintenance therapy, total duration of Mg, number of Mg cycles, systemic drug therapy, and the frequency of recurrences and relapses. The pre-Mg and post-Mg data were statistically analyzed by means of the SAS UNIVARIATE and 2-sided Wilcoxon sign rank and sign tests. Results: All patients had an effective clinical response and remained in clinical remission for a mean period of 18.6 months after discontinuation of Mg therapy. Serious side effects from Mg use were not observed. Conclusion: Mg therapy appears to have potential as a biologic alternative agent in inducing and maintaining clinical remissions in patients with PF who are resistant to more standard conventional treatment. Mg is effective as monotherapy and may be needed for a period of several months to achieve a long-term clinical remission.

L53 ANSWER 24 OF 36 EMBASE
on STN

ACCESSION NUMBER: 1998170974 EMBASE
TITLE: Strategies for improvement of management of ocular complications in **leprosy**.
AUTHOR: Hogeweg M.
CORPORATE SOURCE: Dr. M. Hogeweg, Department of Ophthalmology, Leiden University Hospital, P B 9600, 2300 RC Leiden, Netherlands
SOURCE: Indian Journal of Leprosy, (1998) 70/1 (61-70).
Refs: 6
ISSN: 0254-9395 CODEN: IJLEEK
COUNTRY: India
DOCUMENT TYPE: Journal; Conference Article
FILE SEGMENT: 012 Ophthalmology
013 Dermatology and Venereology
037 Drug Literature Index
LANGUAGE: English

L53 ANSWER 25 OF 36 EMBASE
on STN

ACCESSION NUMBER: 93283926 EMBASE
DOCUMENT NUMBER: 1993283926
TITLE: Clinically important ocular reactions to systemic drug therapy.
AUTHOR: Rennie I.G.
CORPORATE SOURCE: Dept of Ophthalmology and Orthoptics, The University of Sheffield, Royal Hallamshire Hospital, Glossop Road,Sheffield S10 2JF, United Kingdom
SOURCE: Drug Safety, (1993) 9/3 (196-211).
ISSN: 0114-5916 CODEN: DRSAEA
COUNTRY: New Zealand
DOCUMENT TYPE: Journal; General Review
FILE SEGMENT: 012 Ophthalmology
030 Pharmacology
037 Drug Literature Index
038 Adverse Reactions Titles
LANGUAGE: English
SUMMARY LANGUAGE: English

AB Many systemically administered drugs produce ocular adverse effects. Fortunately, relatively few are capable of causing significant, irreversible visual impairment. It is the responsibility of every clinician when prescribing systemic therapeutic agents to be aware of potential adverse ocular reactions, to appreciate their significance, and to inform the patient of the potential risks of treatment. In instances where serious adverse reactions relate to the cumulative effects of prolonged treatment, it is the responsibility of the prescribing physician to institute appropriate methods of visual screening. In this respect, it is most important to obtain the necessary individual baseline measurements before treatment is commenced. Chloroquine retinopathy is probably the most feared of all adverse ocular reactions to systemic drug therapy. However, it occurs only rarely if the daily dosage of chloroquine does not exceed 250mg. Regular screening using automated perimetry is mandatory if prolonged therapy is contemplated. Amiodarone almost inevitably produces corneal deposits. These rarely produce symptoms, and resolve upon withdrawal of the drug. Optic neuropathy has recently been described with amiodarone. Systemic anticoagulant therapy may be associated with intraocular haemmorhage in patients with pre-existing disciform macular degeneration, and such agents should be used with caution in affected individuals. Systemic corticosteroids produce posterior subcapsular cataracts in susceptible individuals which may profoundly affect visual acuity. Although elevated intraocular pressure may also result from systemic therapy, the relationship between the pressure rise and development of glaucomatous changes remains unclear. Ethambutol may produce optic neuropathy if the daily dosage exceeds 15 mg/kg. The changes are usually reversible within a few weeks of stopping treatment. High doses of tamoxifen may produce a maculopathy with loss of visual acuity, if given for prolonged periods. The risk must be weighed against the benefits of treatment. Patients receiving more than 800 mg/day of thioridazine have developed retinopathy, which is usually reversible if detected early enough. Tricyclic antidepressants and other agents with anticholinergic properties may cause disturbances of accommodation and pupillary dilatation. The latter may rarely precipitate acute angle closure glaucoma in susceptible individuals.

L53 ANSWER 26 OF 36 EMBASE
on STN
ACCESSION NUMBER: 83248886 EMBASE
DOCUMENT NUMBER: 1983248886

TITLE: **Congenital** cataract due to **tetracycline** . Animal experiments and clinical observation.
AUTHOR: Krejci L.; Brettschneider I.
CORPORATE SOURCE: Ophthalmol. Dep., Charles Univ., Prague, Czechoslovakia
SOURCE: Ophthalmic Paediatrics and Genetics, (1983) 3/1 (59-60). CODEN: OPGEDY
COUNTRY: Netherlands
DOCUMENT TYPE: Journal
FILE SEGMENT: 037 Drug Literature Index
038 Adverse Reactions Titles
012 Ophthalmology
007 Pediatrics and Pediatric Surgery
022 Human Genetics
040 Drug Dependence, Alcohol Abuse and Alcoholism
LANGUAGE: English
AB For the first time, a congenital cataract due to **tetracycline** hydrochloride in animal experiments and in human foetuses was demonstrated. This cataract was found after intramuscular or peroral administration of **tetracycline** hydrochloride to pregnant animals or pregnant women. No eye changes were observed in sucklings due to lactation, when the mothers were treated with **tetracycline** post-partum. The most dangerous period for **tetracycline** cataract formation seems to be the first trimester of pregnancy.

L53 ANSWER 27 OF 36 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 79051227 EMBASE
DOCUMENT NUMBER: 1979051227
TITLE: [Concentration of **minocycline** in human aqueous **humor** after oral administration]. MINOCYCLIN-KONZENTRATION IM MENSCHLICHEN KAMMERWASSER NACH ORALER APPLIKATION.
AUTHOR: Hartwig H.; Mester U.; Krasemann Ch.
CORPORATE SOURCE: Abt. Mikrochirurg. Auge, Univ. Augenklin., Bonn, Germany
SOURCE: Klinische Monatsblatter fur Augenheilkunde, (1978) 173/6 (842-845). CODEN: KMAUAI
COUNTRY: Germany
DOCUMENT TYPE: Journal
FILE SEGMENT: 037 Drug Literature Index
012 Ophthalmology
LANGUAGE: German
SUMMARY LANGUAGE: English
AB For antibacterial prophylaxis in intraocular surgery **minocycline** was administered orally in 22 cataract-patients. The concentration levels reached in the aqueous humor were determined. The detected levels ranged in some cases from 0.08 to 0.2 mcg/ml, the majority were below 0.06 mcg/ml.

L53 ANSWER 28 OF 36 EMBASE COPYRIGHT 2004 ELSEVIER INC. ALL RIGHTS RESERVED. on STN
ACCESSION NUMBER: 76078448 EMBASE
DOCUMENT NUMBER: 1976078448
TITLE: **Congenital** cataract and maternal steroid ingestion.
AUTHOR: Kraus A.M.
CORPORATE SOURCE: 85 High Str., Buffalo, N.Y. 14203, United States
SOURCE: Journal of Pediatric Ophthalmology, (1975) 12/2 (107-108).

CODEN: JPOPAF
DOCUMENT TYPE: Journal
FILE SEGMENT: 037 Drug Literature Index
038 Adverse Reactions Titles
022 Human Genetics
012 Ophthalmology
021 Developmental Biology and Teratology
LANGUAGE: English
AB A case of congenital cataracts associated with maternal steroid ingestion is presented. Although the association may be fortuitous, the report was deemed worthwhile, as certainly there is circumstantial evidence that the relationship may be causal.

L53 ANSWER 29 OF 36 BIOSIS COPYRIGHT 2004 BIOLOGICAL ABSTRACTS INC. on STN
ACCESSION NUMBER: 1994:23251 BIOSIS
DOCUMENT NUMBER: PREV199497036251
TITLE: The influence of drugs on the properties of gels and swelling characteristics of **matrices** containing methylcellulose or hydroxypropylmethylcellulose.
AUTHOR(S): Mitchell, K.; Ford, J. L. [Reprint author]; Armstrong, D. L.; Elliott, P. N. C.; Hogan, J. E.; Rostron, C.
CORPORATE SOURCE: Drug Targeting Res. Group, Sch. Pharmacy, Liverpool John Moores Univ., Byron St., Liverpool L3 3AF, UK
SOURCE: International Journal of Pharmaceutics (Amsterdam), (1993) Vol. 100, No. 1-3, pp. 165-173.
CODEN: IJPHDE. ISSN: 0378-5173.
DOCUMENT TYPE: Article
LANGUAGE: English
ENTRY DATE: Entered STN: 25 Jan 1994
Last Updated on STN: 26 Jan 1994
ED Entered STN: 25 Jan 1994
Last Updated on STN: 26 Jan 1994
AB The **cloud** points, matrix swelling and get layer formation in matrices containing cellulose ethers and indomethacin, propranolol hydrochloride or **tetracycline** hydrochloride have been investigated. The two hydrochloride salts contributed to the matrix swelling and gel layer formation, maintaining the integrity of matrices containing methylcellulose. Gel layer formation, measured by thermomechanical analysis was most rapid, and the layer thickest, in matrices containing propranolol hydrochloride. This mimicked **cloud** point determination where propranolol salted the cellulose ethers into solution to a greater extent than **tetracycline**. The poorly soluble indomethacin failed to contribute to swelling and gel layer formation. Studies, using U-tube viscometry, indicated that the viscosity of gels containing HPMC E4M, HPMC F4M, HPMC K4M and methylcellulose reduced on storage. This appeared to be further catalysed by the inclusion of drugs, and especially of **tetracycline** hydrochloride in the gels.

L53 ANSWER 30 OF 36 BIOSIS COPYRIGHT 2004 BIOLOGICAL ABSTRACTS INC. on STN
ACCESSION NUMBER: 1989:256230 BIOSIS
DOCUMENT NUMBER: PREV198936123454; BR36:123454
TITLE: CHEMICALLY INDUCED **CATARACTS** IN THE FETUS AND **NEONATE.**
AUTHOR(S): ROGERS J M [Reprint author]; CHERNOFF N
CORPORATE SOURCE: PERINATAL TOXICOL BRANCH, DEV BIOL DIV, HEALTH EFFECTS RES LAB, US ENVIRON PROTECTION AGENCY, RESEARCH TRIANGLE PARK, NC 27711, USA

SOURCE: (1988) pp. 255-276. KACEW, S. AND S. LOCK (ED.). TOXICOLOGIC AND PHARMACOLOGIC PRINCIPLES IN PEDIATRICS. XVIII+314P. HEMISPHERE PUBLISHING CORPORATION: NEW YORK, NEW YORK, USA; LONDON, ENGLAND, UK. ILLUS. ISBN: 0-89116-631-9.
DOCUMENT TYPE: Book
FILE SEGMENT: BR
LANGUAGE: ENGLISH
ENTRY DATE: Entered STN: 24 May 1989
Last Updated on STN: 24 May 1989
ED Entered STN: 24 May 1989
Last Updated on STN: 24 May 1989

L53 ANSWER 31 OF 36 BIOSIS COPYRIGHT 2004 BIOLOGICAL ABSTRACTS INC. on STN
ACCESSION NUMBER: 1988:209379 BIOSIS
DOCUMENT NUMBER: PREV198834102389; BR34:102389
TITLE: PHOTOSENSITIZED GENERATION OF **SINGLET** MOLECULAR OXYGEN BY THE ENDOGENOUS SUBSTANCES OF THE CRYSTALLINE LENS.
AUTHOR(S): YEGOROV S YU [Reprint author]; BABIZHAYEV M A; KRANOVSKII A A JR; SHVEDOVA A A
CORPORATE SOURCE: BIOL FAC, LOMONOSOV STATE UNIV, MOSCOW, USSR
SOURCE: Biophysics (English Translation of Biofizika), (1987) Vol. 32, No. 1, pp. 184-186.
CODEN: BIOPAE. ISSN: 0006-3509.
DOCUMENT TYPE: Article
FILE SEGMENT: BR
LANGUAGE: ENGLISH
ENTRY DATE: Entered STN: 25 Apr 1988
Last Updated on STN: 25 Apr 1988
ED Entered STN: 25 Apr 1988
Last Updated on STN: 25 Apr 1988

L53 ANSWER 32 OF 36 BIOSIS COPYRIGHT 2004 BIOLOGICAL ABSTRACTS INC. on STN
ACCESSION NUMBER: 1984:152255 BIOSIS
DOCUMENT NUMBER: PREV198427068747; BR27:68747
TITLE: QUANTITATIVE EVALUATION OF THE PHOTO SENSITIZING EFFICIENCY OF **VARIOUS** DRUGS ON LENS PROTEIN.
AUTHOR(S): ROBERTS J E [Reprint author]; DILLON J
CORPORATE SOURCE: FORDHAM UNIV, NYC, NEW YORK 10023, USA
SOURCE: Photochemistry and Photobiology, (1984) Vol. 39, No. SUPPL, pp. 67S.
Meeting Info.: 9TH INTERNATIONAL CONGRESS ON PHOTOBIOLOGY AND 12TH ANNUAL MEETING OF THE AMERICAN SOCIETY FOR PHOTOBIOLOGY, PHILADELPHIA, PA., USA, JULY 1-6, 1984.
PHOTOCHEM PHOTOBIOL.
CODEN: PHCBAP. ISSN: 0031-8655.
DOCUMENT TYPE: Conference; (Meeting)
FILE SEGMENT: BR
LANGUAGE: ENGLISH

L53 ANSWER 33 OF 36 BIOSIS COPYRIGHT 2004 BIOLOGICAL ABSTRACTS INC. on STN
ACCESSION NUMBER: 1980:194865 BIOSIS
DOCUMENT NUMBER: PREV198069069861; BA69:69861
TITLE: **OCULAR** PENETRATION OF ORALLY ADMINISTERED **MINOCYCLINE**.
AUTHOR(S): POIRIER R H [Reprint author]; ELLISON A C
CORPORATE SOURCE: CORNEA EXTERNAL DIS SERV, DIV OPHTHALMOL, UNIV TEX HEALTH

SCI CENT, 7703 FLOYD CURL DR, SAN ANTONIO, TEX 78284, USA
SOURCE: Annals of Ophthalmology, (1979) Vol. 11, No. 12, pp. 1859-1861.
CODEN: ANOPB5. ISSN: 0003-4886.
DOCUMENT TYPE: Article
FILE SEGMENT: BA
LANGUAGE: ENGLISH

AB **Minocycline** administered orally with a loading dose of 200 mg followed by 2 doses of 100 mg 12 h apart produce adequate levels in the aqueous of patients with noninflamed eyes at the time of routine **cataract** extraction. The plasma to aqueous ratio was approximately 2:1. This study suggests the potential usefulness of **minocycline** in ocular infections that are due to sensitive bacteria.

L53 ANSWER 34 OF 36 WPIX COPYRIGHT 2004 THOMSON DERWENT on STN
ACCESSION NUMBER: 2004-313740 [29] WPIX
DOC. NO. CPI: C2004-119123
TITLE: Composition useful for the treatment of **ocular** injuries and inflammation caused by foreign bodies, infections, burns comprises microspheres in suspension and a carrier.
DERWENT CLASS: A96 B05 P32
INVENTOR(S): FEITELBERG, L; RITTER, M; RITTER, V; TENDLER, M
PATENT ASSIGNEE(S): (FEIT-I) FEITELBERG L; (RITT-I) RITTER M; (RITT-I) RITTER V; (TEND-I) TENDLER M; (KARM-I) KARMALI R A; (POLY-N) POLYHEAL LTD
COUNTRY COUNT: 105
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
US 2004043075	A1	20040304	(200429)*		11
WO 2004021942	A1	20040318	(200429)	EN	

RW: AT BE BG CH CY CZ DE DK EA EE ES FI FR GB GH GM GR HU IE IT KE LS LU MC MW MZ NL OA PT RO SD SE SI SK SL SZ TR TZ UG ZM ZW
W: AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NI NO NZ OM PG PH PL PT RO RU SC SD SE SG SK SL SY TJ TM TN TR TT TZ UA UG UZ VC VN YU ZA ZM ZW

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
US 2004043075	A1	US 2002-234274	20020904
WO 2004021942	A1	WO 2003-US27769	20030904

PRIORITY APPLN. INFO: US 2002-234274 20020904

AB US2004043075 A UPAB: 20040505
NOVELTY - A composition comprises microspheres (0.001 - 25 weight%) in suspension and a carrier. The microspheres are insoluble in the carrier. The composition is contained in a package from which a portion is

dispensed and applied to an ocular surface.

DETAILED DESCRIPTION - An INDEPENDENT CLAIM is included for a device comprising a container holding the composition. The device is used to resuspend the composition.

ACTIVITY - Ophthalmological; Vulnerary; Anti-inflammatory; Antimicrobial; Virucide; Antiallergic; Dermatological; Antiseborrheic; Endocrine-Gen.; Antiulcer; Osteopathic; Hypotensive; Muscular-Gen.; Antidiabetic.

MECHANISM OF ACTION - None given.

USE - For the treatment of ocular injuries and inflammation caused by ophthalmic surgery procedures including post-trabeculectomy (filtering injury), post pterygium surgery, post ocular adnexa trauma and surgery, post intraocular surgery, post vitrectomy, post retinal detachment or post retinotomylectomy. The injuries include foreign bodies, infections, burns, lesions, ischemia, injuries from blunt trauma, traumatic hyphema, sympathetic ophthalmia, injuries from radiant energy, **cataracts** and optic nerve injuries. The burn injury includes chemical burn, thermal burn and radiation burn (all claimed). Also useful as a medium for microspheres and a drug delivery system for pharmaceutical agents. The injuries also include lacerations, injuries sustained during medical procedures, chronic or hereditary conditions, injuries from microbial infections, corneal erosions, and nutritional and toxic optic neuropathies. Also useful for the treatment of elevated intraocular pressure, posterior subcapsular **cataract** formation, secondary ocular infection, retardation of corneal wound healing, uveitis, mydriasis, transient ocular discomfort and ptosis, adrenal insufficiency, Cushing's syndrome, peptic ulceration, osteoporosis, hypertension, muscle weakness, growth inhibition, diabetes, activation of inhibition, mood changes and delayed wound healing, inflammatory conditions of the ocular adnexa, palpebral or bulbar conjunctiva, cornea and anterior segment of the globe, viral, allergic conjunctivitis, acne rosacea, iritis and iridocyclitis.

ADVANTAGE - The microspheres are capable of forming multi-point contacts with a cellular membrane and are non-biodegradable during the period of therapy. The composition promotes wound healing, cellular fusion, corneal stromal remodeling and reepithelization, scar reduction, ocular injury healing and pain relief. The composition suppresses inflammatory processes without impairing wound healing processes and this does not require the use of steroids and non-steroidal antiinflammatory drugs. As the composition promotes healing of the ocular tissue when applied to an inflamed eye, the composition shortens the time of preparation of a damaged eye for surgery. The composition maintains corneal transparency.

Dwg.0/2

ABEX UPTX: 20040505

ADMINISTRATION - The composition is administered topically or ophthalmically. No dosage given.

EXAMPLE - No relevant example given.

L53 ANSWER 35 OF 36 WPIX COPYRIGHT 2004 THOMSON DERWENT on STN
ACCESSION NUMBER: 2000-638316 [61] WPIX
CROSS REFERENCE: 2003-379849 [36]; 2003-787223 [74]; 2004-080043 [08]
DOC. NO. CPI: C2000-192013
TITLE: Treating eyes suffering from e.g. conjunctivitis, ophthalmia neonatorum, trachoma, corneal **ulcers**, keratitis and/or infectious uveitis by topically applying azalide antibiotic e.g. azithromycin.

DERWENT CLASS: B03 P32
INVENTOR(S): BOWMAN, L M; DAWSON, C R
PATENT ASSIGNEE(S): (INSI-N) INSITE VISION INC
COUNTRY COUNT: 93
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
WO 2000057866	A2	20001005	(200061)*	EN	31
RW: AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW NL OA PT SD SE SL SZ TZ UG ZW					
W: AE AG AL AM AT AU AZ BA BB BG BR BY CA CH CN CR CU CZ DE DK DM DZ EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX NO NZ PL PT RO RU SD SE SG SI SK SL TJ TM TR TT TZ UA UG US UZ VN YU ZA ZW					
AU 2000039203	A	20001016	(200106)		
US 6239113	B1	20010529	(200132)		
EP 1165058	A2	20020102	(200209)	EN	
R: AL AT BE CH CY DE DK ES FI FR GB GR IE IT LI LT LU LV MC MK NL PT RO SE SI					
KR 2002005634	A	20020117	(200250)		
ZA 2001007454	A	20021127	(200305)		54
JP 2002540147	W	20021126	(200307)		34
US 6569443	B1	20030527	(200337)		
MX 2001009718	A1	20020801	(200367)		
US 2003206956	A1	20031106	(200374)		
NZ 514378	A	20031219	(200404)		

APPLICATION DETAILS:

PATENT NO	KIND		APPLICATION	DATE
WO 2000057866	A2		WO 2000-US7924	20000327
AU 2000039203	A		AU 2000-39203	20000327
US 6239113	B1	CIP of	US 1999-282165	19990331
			US 1999-346923	19990702
EP 1165058	A2		EP 2000-918382	20000327
			WO 2000-US7924	20000327
KR 2002005634	A		KR 2001-712268	20010926
ZA 2001007454	A		ZA 2001-7454	20010910
JP 2002540147	W		JP 2000-607617	20000327
			WO 2000-US7924	20000327
US 6569443	B1	CIP of	US 1999-282165	19990331
		Cont of	US 1999-346923	19990702
			US 2001-767943	20010124
MX 2001009718	A1		WO 2000-US7924	20000327
			MX 2001-9718	20010926
US 2003206956	A1	CIP of	US 1999-282165	19990331
		Cont of	US 1999-346923	19990702
		Cont of	US 2001-767943	20010124
			US 2003-407425	20030407
NZ 514378	A		NZ 2000-514378	20000327
			WO 2000-US7924	20000327

FILING DETAILS:

PATENT NO	KIND	PATENT NO

AU 2000039203	A	Based on	WO 2000057866
EP 1165058	A2	Based on	WO 2000057866
JP 2002540147	W	Based on	WO 2000057866
US 6569443	B1	Cont of	US 6239113
MX 2001009718	A1	Based on	WO 2000057866
US 2003206956	A1	Cont of	US 6239113
		Cont of	US 6569443
NZ 514378	A	Based on	WO 2000057866

PRIORITY APPLN. INFO: US 1999-346923 19990702; US
1999-282165 19990331; US
2001-767943 20010124; US
2003-407425 20030407

AB WO 200057866 A UPAB: 20040310
NOVELTY - Treating eyes comprises topically applying azalide antibiotics to the eyes in amounts effective to treat or prevent infections in the tissues of eyes.

ACTIVITY - Ophthalmological; antibiotic; antiinflammatory; antiulcer; antibacterial; parasiticide; protozoacide; antiseborrheic; dermatological. No activity data given.

MECHANISM OF ACTION - None given.

USE - Used to treat conjunctivitis, ophthalmia neonatorum, trachoma, corneal ulcers, keratitis, keratoconjunctivitis, endophthalmitis and/or infectious uveitis (claimed). They may also be used to treat or prevent a variety of conditions associated with ocular infection including conditions of the lids (blepharitis, blepharconjunctivitis, meibomianitis, acute or chronic hordeolum, chalazion, dacryocystitis, dacryoadenitis, acne rosacea), conditions of the conjunctiva (conjunctivitis, ophthalmia neonatorum, trachoma), conditions of the cornea (corneal ulcers, superficial and interstitial keratitis, keratoconjunctivitis, foreign bodies, post-operative infections), conditions of the anterior chamber and uvea (endophthalmitis, infectious uveitis) and post-operative infections. They may also be used as prophylactics, prior to surgical procedures involving the lids and lacrimal apparatus, conjunctival surgery including removal of ptyregia, pingueculae and tumors, conjunctival transplantation, traumatic lesions such as cuts, burns and abrasions, and conjunctival flaps, corneal surgery including removal of foreign bodies, keratotomy and corneal transplants, refractive surgery including photorefractive procedures, glaucoma surgery including filtering blebs, paracentesis of the anterior chamber, iridectomy, **cataract** surgery, retinal surgery and procedures involving the extra-ocular muscles. They are used to treat infections caused by bacterial or parasitic organism (e.g. malaria, Staphylococcus or Streptococcus).

ADVANTAGE - The use of depot formulations more easily facilitates loading of ocular tissues in vie of the typically slow and low penetration rates of the generally water-insoluble/poorly soluble azalide antibiotics.
Dwg.0/0

ABEX UPTX: 20001128
ADMINISTRATION - Application is topical to the eye, especially by supplying a depot of a composition, preferably an aqueous suspension, ointment or insert. The topically applied depot remains for at least 30 minutes (especially at least 4 hours) after administration. Administration may be in combination with additional medicaments including antibiotics, antivirals, antifungals, anesthetics, anti-inflammatories or anti-allergics (all claimed).

L53 ANSWER 36 OF 36 WPIX COPYRIGHT 2004 THOMSON DERWENT on STN
ACCESSION NUMBER: 1987-337227 [48] WPIX

DOC. NO. CPI: C1987-143906
TITLE: Compsns. for ophthalmic drugs containing di alkyl phosphate ester(s) - for improved **osmotic** ability and efficacy of medicinal component.
DERWENT CLASS: A96 B04 B05 B07
PATENT ASSIGNEE(S): (KAOS) KAO CORP
COUNTRY COUNT: 1
PATENT INFORMATION:

PATENT NO	KIND	DATE	WEEK	LA	PG
JP 62240629	A	19871021	(198748)*		4

APPLICATION DETAILS:

PATENT NO	KIND	APPLICATION	DATE
JP 62240629	A	JP 1986-75922	19860402

PRIORITY APPLN. INFO: JP 1986-75922 19860402
AB JP 62240629 A UPAB: 19930922
Compsn. contains (1) dialkylphosphate esters and formula (I) and (2) medicinal components. R1 and R2 are 6-24C hydrocarbon gp.; R3 and R4 are 2-6C hydrocarbon gp.; m and n = 0-20; X = H, alkali metal, ammonium 2 or 3C mono, di, tri-alkanolamine, 1-4C mono, di, tri, tetra-alkylammonium, basic amino acid or salts of morpholine.

The alkali metal is sodium, potassium, lithium, rubidium, etc.. the basic aminoacid is lysine, arginine, histidine, etc. and basic aminoacid salts such as arginine didecylphosphate ester, arginine didodecylphosphate ester, lysine di decylphosphate ester, etc. are pref. used. The medicinal component is a miotic agent (e.g., pilocarpine hydrochloride, pilocarpine, physostigmine salicylate, etc.); mydriatic agents (e.g. cyclopentolate hydrochloride, atropine sulphate, etc.); **cataract** therapeutic agents (e.g., glutathione, cataria, etc.); cornea therapeutic agents (e.g., sodium chondroitin sulphate, cyanocobalamine, etc.); vasoconstricting agents (e.g. naphazoline nitrate, etc.); antibiotics (e.g. **tetracyclin** hydrochloride, etc.); corticosteroid (e.g. cortisone acetate, hydrocortisone acetate, etc.); antiviral agents (e.g., idoxuridine, trifluorothymidine, etc.); or antiinflammatories (e.g., indomethacin, ibuprofen, naproxene, etc..).
0/0

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FILE 'HOME' ENTERED AT 10:59:46 ON 09 JUN 2004

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